



City of Vinita Park

8374 Midland Blvd. • Vinita Park, MO 63114 • (314) 428-7373 • Fax (314) 428-7379

APPLICATION FOR PLAT, ZONING CHANGES, AND SPECIAL USE

<input type="checkbox"/> Preliminary Plat	<input type="checkbox"/> Special Use Permit	<input type="checkbox"/> Subdivision Plat
<input type="checkbox"/> Boundary Plat	<input type="checkbox"/> Zoning Change	<input type="checkbox"/> Variance
<input type="checkbox"/> Amend Plat Minor/Major	<input type="checkbox"/> Re-subdivision Plat	<input type="checkbox"/> Temporary Use Permit
<input type="checkbox"/> Parking Lot	<input type="checkbox"/> Consolidation Plat	<input type="checkbox"/> Street Name Change

ADDRESS OF REQUEST: _____
SUBDIVISION _____ LOT(S) _____ BOOK _____ PAGE _____

SUBMITTAL REQUIREMENTS:

- For Plat applications (13) legible sets required. Detailed drawings of the site and proposed site improvement are required.
- Submit applications and drawings 5 weeks before Board of Alderpersons Meeting. If you fail to submit in a timely manner your request will be considered at the next meeting date.
- DO NOT** destroy, tear down, remodel, or grade any structures or make site improvements until FINAL approval by Board of Alderpersons.
- Applicant is responsible for all fees incurred by the City (Public Hearing Notices, advertising, etc.)

Applicant _____ Phone () _____

Applicant is: (check one) Owner Agent Purchaser of Contract _____ Lease _____

Applicant's Legal Mailing Address: _____

Addresses of the *Other* Properties Involved _____

Permanent Parcel Numbers _____

Owner's Name _____ Name of Business: _____

Address (city/state/zip), _____

Phone () _____ Fax () _____ Cell () _____

Email _____

PROPERTY INFORMATION:

Property Description: _____ Zoning District: _____ Proposed Zoning: _____

The property is presently being used as: _____

The request is to use it for: (nature of business) _____

Hours of business: _____ AM to _____ PM 24 hours

Days of Operations: _____

Approximate size of tract: _____ Acres: _____ Sq. ft. Lot: _____

Size/Sq. Footage of structure (s) on tract _____

By signing this application the owner(s), owner(s) agent, and applicants attest that all information and facts provided on this form and attachments are complete and accurate and that any omission or incorrect fact or information may invalidate any notice or subsequent action taken by the City of Vinita Park Board of Alderpersons. (All applicants and owners shall sign the application. Attach additional name/address/signatures and date pages as needed).

Applicant Signature: _____ Owner's Signature: _____

Date: _____ Date: _____

STAFF USE ONLY

FEE: \$350.00 DATE PAID: _____ CASH CHECK CREDIT CARD
RECEIPT NO: _____

CLERK'S SIGNATURE: _____ CASE NO: _____

BOARD OF ALDERPERSON MEETING DATE: _____